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United States Co Southern District of

PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

FOR THE	DISTRICT COURT DISTRICT OF TEXAS DIVISION	APR 1 4 2020
Plaintiff's Name and ID Number	<u> </u>	
Plaintiff's Name and ID Number	·	*
HAMIS COUNTY JATE Place of Confinement	<u> </u>	
Place of Confinement		
	CASE NO	
•	(Clerk wi	Ill assign the number)
ARRIS LOUNTY JAIL TOIN, SAN JACINTO Defendant's Name and Address	HOUSTON, TX 77002	
Defendant's Name and Address		
	·	
Defendant's Name and Address		
(DO NOT USE "ET AL.")		
INSTRUCTION	ONS - READ CAREFULLY	

#### NOTICE:

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

- 1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
- 2. Your complaint must be <u>legibly</u> handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, <u>DO NOT USE THE REVERSE</u> <u>SIDE OR BACK SIDE OF ANY PAGE</u>. ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
- 3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
- 4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

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EXHAUSTION OF GRIEVANCE PROCEDURES:

ACTION THE SUIT:  Name and address of plaintiff: FORKIST HENNEY  TO I NORTH SAN TROCKTO  HOUSTON, TK T7002  Full name of each defendant, his official position, his place of employment, and his full mailing address.  Defendant #1: HARRIS COUNTY JAIL  Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.  NOT ALLOWING MR TO HAVE ACCESS TO SUNTICHT.
Name and address of plaintiff: FORP/ST HENNEY  701 NORTH SAN TRETNTO  HOUSTON, TK 77002  Full name of each defendant, his official position, his place of employment, and his full mailing address.  Defendant#1: HAPPES COUNTY JAZE  Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.  NOT ALLOWING MR TO HAVE ACCESS TO SUNLIGHT.
TOI NORTH SAN TRITOR  HOUSTON, TK 77002  Full name of each defendant, his official position, his place of employment, and his full mailing address.  Defendant#1: HARRIS COUNTY JAIL  Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.  NOT ALLOWING MR TO HAVE ACKS TO SUNTICHT.
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Defendant#2:
Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
Defendant#3:
Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
Defendant#4:
Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
Defendant #5:
- E

# V. STATEMENT OF CLAIM:

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	orth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complain tated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE Y
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	DURING MY INCARCERATIONE I HAUR NOT BEEN
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Z GEI A.	VERAL BACKGROUND INFORMATION: State, in complete form, all names you have ever used or been known by including any and all alia
Z GEI A.	VERAL BACKGROUND INFORMATION:
GEI A. B.	VERAL BACKGROUND INFORMATION: State, in complete form, all names you have ever used or been known by including any and all alia
GEI A.	VERAL BACKGROUND INFORMATION: State, in complete form, all names you have ever used or been known by including any and all aliances all TDCJ-CID identification numbers you have ever been assigned and all other state or federal por FBI numbers ever assigned to you.
GEN A. B. SAN	SERAL BACKGROUND INFORMATION: State, in complete form, all names you have ever used or been known by including any and all aliance been been known by including any and all aliance been been assigned and all other state or federal por FBI numbers ever assigned to you.
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GEI A. B. SAN A. B.	ERAL BACKGROUND INFORMATION:  State, in complete form, all names you have ever used or been known by including any and all alia of the state of federal por FBI numbers ever assigned to you.  1. Court that imposed sanctions (if federal, give the district and division):  1. Court that imposed sanctions (if federal, give the district and division):

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	Has any court ever warned or notified you that sanctions of	
D.	If your answer is "yes," give the following information fo (If more than one, use another piece of paper and answer	
	1. Court that issued warning (if federal, give the district a	nd division):
	2. Case number:	NA
	3. Approximate date warning was issued:	1/17
Executed	on: <u>4-9-20</u> DATE	Fornset (Remay (Signature of Plaintiff)
PLAINTI	IFF'S DECLARATIONS	
1.	I declare under penalty of perjury all facts presented in this correct.	s complaint and attachments thereto are true and
2.	I understand, if I am released or transferred, it is my respon- mailing address and failure to do so may result in the disr	
	I understand I must exhaust all available administrative re	emedies prior to filing this lawsuit.
4.	I understand I am prohibited from bringing an <i>in forma pe</i> civil actions or appeals (from a judgment in a civil action) i	
٠.	or detained in any facility, which lawsuits were dismissed or failed to state a claim upon which relief may be granted	d on the ground they were frivolous, malicious,
	physical injury.	
5.	I understand even if I am allowed to proceed without prep filing fee and costs assessed by the court, which shall be inmate trust account by my custodian until the filing fee in	deducted in accordance with the law from my
	ath approx	
Signed thi	isday ofday of(month)	, 20 <u>/ / .</u> (year)
		FORRYST HENNEY
		Janyyet Almey
		(Signature of Plaintiff)

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.

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- i. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of \$400.00.
  - 2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
  - 3. The Prison Litigation Reform Act of 1995 (PLRA) provides "...if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
  - 4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

### **CHANGE OF ADDRESS**

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

## I. PREVIOUS LAWSUITS:

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A. Ha	ive you filed <i>any</i> other lawsuit in state or federal court relating to your imprisonment?YES_X_NO
lav	your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one wsuit, describe the additional lawsuits on another piece of paper, giving the same information.)  Approximate date of filing lawsuit:
2.	Parties to previous lawsuit:
	Plaintiff(s) $\Omega$
	Defendant(s) (1) / A
3.	Court: (If federal, name the district; if state, name the county.)
4.	Cause number:
5.	Name of judge to whom case was assigned:
6.	Disposition: (Was the case dismissed, appealed, still pending?)
7.	Approximate date of disposition:
PLACE (	OF PRESENT CONFINEMENT:

II.